

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

NAME OF FILER Lodi Balanced Business Coalition, No on Measure R, Sponsored by the Lodi Chamber of Commerce		Date of This Filing 10/28/2004	RECEIVED DataStamp: D 2004 OCT 28 PM 2:45 CITY CLERK CITY OF LODI	LATE CONTRIBUTION REPORT CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER 209/367-7840	I.D. NUMBER (if applicable) 1267189	Report No. 1		
STREET ADDRESS 35 South School Street		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Lodi, CA	STATE CA	ZIP CODE 95240		
		No. of Pages 1		

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
10/27/2004	BIPAC of the Delta (#881369) 1150 W. Robinhood Drive, Ste. C Stockton, CA 95207	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		

*Contributor Codes

IND - Individual
COM - Recipient Committee (other than PTY or SCC)
OTH - Other

PTY - Political Party
SCC - Small Contributor Committee

Reason for Amendment: _____

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RECEIVED

LATE CONTRIBUTION REPORT

NAME OF FILER Dixon for Council		Date of This Filing 10/27/04	Date Stamp 2004 OCT 27 PM 3:1	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER 209-367-1936	I.D. NUMBER (if applicable) 1268599	Report No. 1	CITY CLERK CITY OF LODI	
STREET ADDRESS 2631 Bristol Lane		<input checked="" type="checkbox"/> Amendment to Report No. 2 (explain below)		
CITY Lodi	STATE CA	ZIP CODE 95242	No. of Pages 1	

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
10/26/04	Peace Officers Research Association of California PAC Small Contributor Committee/Committee # 810830 4010 Truxel Road Sacramento, CA 95834	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		1,000.00 <input type="checkbox"/> Check if Loan
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<input type="checkbox"/> Check if Loan
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<input type="checkbox"/> Check if Loan

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OTH - Other
PTY - Political Party
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Reason for Amendment: The above mentioned contribution was made in the amount of \$1000.00 and was made within 16 days prior to the election.